

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

County: Wells

LCC: Citizens Against Drug Abuse (CADA)

Date Due: October 31, 2015

Date Submitted: October 28, 2015

New Plan

Plan Update



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County Commissioners:

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Address: Wells County Courthouse - 102 West Market Street

City: Bluffton, IN

Zip Code: 46714

Plan Summary

Mission Statement: The mission of Wells County Citizens Against Drug Abuse (CADA) is to investigate alcohol, tobacco, and other drug problems in our community; coordinate efforts to reduce these problems; and examine funding of programs designed to achieve this goal.

History: Wells County CADA was established October 24, 1988 by the Prosecutor, Chief of Police, Detectives, and a Board of Directors made up of local law enforcers. This group of volunteers examined the drug culture and determined the need for better drug trafficking to deter and reduce drug problems. The original Board of Directors solicited funds from private citizens, businesses, and key leaders to help purchase equipment and to provide training and money for undercover drug purchases.

A year later, the Governor's Commission for a Drug-Free Indiana was established. The mission of CADA and the Governor's Commission intertwined, so CADA became the Local Coordinating Council (LCC) for Wells County. Prior to 2005, CADA was comprised solely of volunteers, whose primary function was the distribution of the Local Drug Free Community Fund. In 2005, a coordinator was hired to follow through with administrative and other miscellaneous duties of CADA. In 2013, CADA began contracting with an independent consultant to review and update the comprehensive plan; compile and submit quarterly reports; and to ensure overall compliance with the state.

At the time of the 2010 census, there were 27,636 people living in Wells County. The population is 97.3% Caucasian and 2% Hispanic. All other ethnic groups comprise less than 1% of the population. Wells County is essentially a rural community. Bluffton is the largest city with a population of 9,897; Ossian is next in size with 3,289 people. The median household income for Wells County is \$47,202. The primary type of industry present in the county is manufacturing. The largest percentages of occupations were classified as production, transportation, and material-moving occupations.

Summary of the Comprehensive Community Plan: In September 2015, an electronic survey was distributed throughout the community in order to identify the needs in Wells County related to substance abuse education, prevention and treatment services. The survey consisted of 10 questions. It was designed to help guide CADA in strategic planning and determine the best use of the limited resources in the community. Significant findings from those surveyed were as follows:

- 25% have been unable to receive or find TREATMENT services in Wells County
- 18.75% have been unable to access necessary PREVENTATIVE or EDUCATIONAL services in Wells County
- 39.24% have been unable to receive TREATMENT, PREVENTATIVE services or EDUCATION services in Wells County due to the financial cost
- 68.42% feel that the services in Wells County do not sufficiently address ADOLESCENT substance abuse issues

- The statement chosen to best describe the substance abuse programming in Wells County:
 - 22.78% more EDUCATIONAL programs are needed
 - 29.11% more PREVENTATIVE programs are needed
 - 48.10% more TREATMENT programs are needed
- 77.22% feel substance abuse would decline if low cost TREATMENT, PREVENTIVE or EDUCATIONAL options were available in Wells County

A committee was formed to review the survey results, assess the data in the current comprehensive plan and to determine the direction for the a new 3-year community comprehensive plan. Members of the committee included law enforcement, probation, social services and treatment.

The following problem statements for CADA were developed:

- 1) Alcohol, tobacco and other drug use in Wells County is problematic**
- 2) There is a lack of affordable resources and an ongoing need for ATOD education, prevention, and treatment services in Wells County**

CADA membership is increasing and monthly meetings are becoming more informational and collaborative. CADA and its members have increased their visibility and involvement in the community through various events the past few years. CADA members serve on many other boards and committees, host or attend events and distribute materials related to ATOD's. In 2008, CADA began appreciating local citizens through an annual awards luncheon. During the luncheon awards are given to recognize outstanding individuals or groups in the categories of: Professional Leader, Volunteer Leader, and Friend of CADA. The awards luncheon is highlighted in the daily newspaper and also posted online. In 2009, CADA started a website <http://www.wellscounty.org/cada.htm> to inform the community about CADA bylaws, officers, members, meetings, grant applications, and awards.

We are in the process of collaborating with another group (WRAPP – Wells Resources Available for Providers and People) that has independently discussed issues related to substance abuse. Our plan is to use our mutual discussions to evaluate and update our comprehensive plan and to periodically review and determine progress made towards the goals and objectives set forth. Out of these discussions and collaboration, a Substance Use Protocol Manual for Wells County was developed and widely distributed in November 2014 to serve as a resource for information, intervention, and treatment of ATOD's.

Membership List

County LCC Name: Citizens Against Drug Abuse (CADA)

#	Name	Organization	Race	Gender	Category
1	Andrews, Vicki	Southern Wells Community Schools	Caucasian	F	Education
2	Bell, Vicki	Wells Community Boys and Girls Club	Caucasian	F	Youth
3	Butcher, Kim	Park Center Bluffton Office	Caucasian	F	Treatment
4	Collier, Betsy	Council on Aging Wells on Wheels	Caucasian	F	Civic Organization
5	Cook, Carl	Helping Hands Pregnancy Resource Center	Caucasian	M	Other
6	Dial, Angie	Family Centered Services / Teen Court	Caucasian	F	Prevention
7	Hill, Alicia	House of Hope Northeast Indiana	Caucasian	F	Treatment
8	Hoag, Molly	Purdue Extension Wells County Office	Caucasian	F	Prevention
9	Holderman, Deane'	Department of Child Services	Caucasian	F	Government
10	Huss, Nathan	Bluffton Police Department	Caucasian	M	Law Enforcement
11	Langel, Sandy	Wells County Health Department	Caucasian	F	Medicine
12	McClish, Brian	Ossian Police Department	Caucasian	M	Law Enforcement
13	Mettler, Rick	Bluffton Middle School	Caucasian	M	Education
14	Misch, Mark	Norwell High School	Caucasian	M	Education
15	Moon, Joan	Community Advocate / Nurse Midwife	Caucasian	F	Parent
16	Morrison, Stacy	Bluffton High School	Caucasian	F	Education
17	Peipenbrink, Rick	Wells County EMS	Caucasian	M	Medical
18	Sherer, Roger	Purdue Extension Wells County Office	Caucasian	M	Youth
19	Turney, Elise	Adams/Wells Crisis Center	Caucasian	F	Self-Help
20	Werich, Greg	Wells County Probation Department	Caucasian	M	Judicial

Problem Identification

A. Problem Statement #1: Alcohol, tobacco, and other drug use in Wells County is problematic.

B. Supportive Data:

1. According to the statistics from the 2014 Indiana Prevention Resource Center student survey, monthly tobacco, alcohol, marijuana and prescription drug use increases dramatically during the middle school and high school years. Statistics from the Northeast Region (LaGrange, Steuben, Noble, DeKalb, Whitley, Allen, Huntington, Adams, Wells) vary only slightly from the statewide numbers (IPRC, Indiana Youth Survey)

	6 th GRADE		9 th GRADE		12 th GRADE	
	Indiana	Northeast IN	Indiana	Northeast IN	Indiana	Northeast IN
cigarettes	1.7%	1.1%	9.3%	7.3%	17.6%	18.5%
alcohol	3.8%	3.4%	17.1%	17.8%	33.9%	27.5%
marijuana	1.3%	1.1%	9.4%	7.6%	17.6%	16.6%
synthetic marijuana	0.4%	0%	2.1%	0%	2.2%	1.6%
prescription drugs	0.7%	0.4%	3.0%	2.3%	5.0%	4.2%
heroin	0.2%	0%	0.5%	1.5%	0.7%	0%

2. Random student drug testing results for the 2014-2015 school year are:
 - Bluffton High School:
 - a. 165 tests (96.5%) of all random tests (171) had a negative result
 - b. 4 tests (2.3%) of all random tests had a positive result for nicotine
 - c. 2 tests (1.2%) of all random tests had a positive result for marijuana
 - d. 5 tests were administered for reasonable suspicion of drug use; 2 had a positive result for drugs (1 marijuana and 1 heroin)
 - Bluffton Middle School:
 - a. 58 tests (96.7%) of all random tests (60) had a negative result
 - b. 2 tests (3.3%) of all random tests had a positive result for nicotine
 - c. 0 tests (0%) of all random tests had a positive result for drugs
 - d. 0 tests were administered for reasonable suspicion of drug use
 - Southern Wells Jr/Sr High School:
 - a. 87 tests (97.8%) of all random tests (89) had a negative result
 - b. 2 tests (2.2%) of all random tests had a positive result for nicotine
 - c. 0 tests (0%) of all random tests had a positive result for drugs
 - d. 0 tests were administered for reasonable suspicion of drug use
 - Norwell High School:
 - a. 140 tests (100%) of all random tests (140) had a negative result
 - b. NHS does not currently screen for nicotine
 - c. 0 tests (0%) of all random tests had a positive result for drugs
 - d. 2 tests were administered for reasonable suspicion of drug use; both had a positive result for marijuana
 - Norwell Middle School:
 - a. 52 tests (100%) of all random tests (52) had a negative result
 - b. NMS does not currently screen for nicotine

- c. 0 tests (0%) of all random tests had a positive result for drugs
- d. 0 tests were administered for reasonable suspicion of drug use
- 3. Wells County Schools reported 83 suspensions and expulsions in 2013-2014, 18 (21.7%) of them were related to alcohol, drugs or weapons (Indiana Department of Education, Annual School Performance Reports)
- 4. Wells County Department of Child Services reported a total of 92 CHINS cases throughout 2014
- 5. In 2014, there were 897 oral screens administered to DCS clients; of those tested, 284 (31.7%) tested positive for drugs including: 55 amphetamine, 69 methamphetamine, 70 THC, 3 cocaine, 78 opiates, 16 benzodiazepines, 1 barbiturates, 94 methadone, 38 oxycodone, 2 tramadol (Wells County Department of Child Services)
- 6. Indiana's adult smoking prevalence (21.9%) is the 12th highest in the nation. It is also significantly higher than the US prevalence of 19.0%. An estimated 11,100 Hoosiers die annually from smoking-attributable causes. (The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2014 / IU Center for Health Policy)
- 7. In 2014, the tobacco outlet density for Wells County was 1.4/1,000 residents (39 tobacco outlets) and 1.34/1,000 residents (8,783 tobacco outlets) for the State of Indiana; the alcohol outlet density for Wells County was 1.01/1,000 residents (28 alcohol licenses) and 1.66/1,000 residents (10,961 alcohol licenses) for the State of Indiana (Indiana Prevention Resource Center, County Profiles Data)
- 8. In 2014, 1 location in Wells County received a violation during a tobacco compliance check and 1 location received 3 violations during an alcohol compliance check (Indiana State Excise Police)
- 9. There were 574 instances of adult crime in Wells County in 2014 (BPD:309, WCSD:213, OPD:52)
- 10. The number of DUI arrests made in Wells County was 100 in 2014; 17.4% of all adult crime (BPD:32, WCSD:61, OPD:7)
- 11. The number of drug arrests made in Wells County was 44 (BPD:24, WCSD:18, OPD:2) in 2014; 39 (BPD:22, WCSD:15, OPD:2) for possession and 5 (BPD:2, WCSD:3, OPD:0) for dealing
- 12. DETECT (Adams/Wells Drug Task Force) note the following activity in 2014: investigated a total of 29 cases and arrested 20 individuals on multiple counts. The following drugs were seized (2 oz marijuana and 2.5 grams meth) (BPD)
- 13. Indiana State Police Meth Lab Seizure Statistics report shows there were 5 clandestine lab incidents in Wells County in 2014; there were 1,488 incidents throughout the state (Indiana State Department of Health)
- 14. Throughout 2014, 58 drivers were stopped during quarterly Operation Pull Over (DUI Enforcement) conducted by BPD; 7 (12.1%) were found to be intoxicated (BPD)
- 15. There were 24 total crashes related to drugs or alcohol in Wells County in 2014 (10:BPD, 14:WCSD, 0:OPD); of the total crashes, 5 (BPD:0, WCSD:5, OPD:0) were fatalities
- 16. During 2013, there were 114 fatal alcohol-impaired (driver with BAC of .08 or higher) collisions in Indiana; 16% of all fatal collisions (Indiana Criminal Justice Institute, Traffic Safety Facts – June 2014)

17. There were 113 juveniles referred to probation for delinquency in 2014; 19 (16.8%) were for alcohol or drug use (Wells County Probation Department)
18. The number of adults referred to probation for alcohol or drug use was 114 in 2014 (Wells County Probation Department)
19. The number of drug screens (for overall probation population) with positive results was 97 out of 392 (24.8%) in 2014 (findings: 30 amphetamines, 1 barbiturate, 8 benzodiazepine, 1 cocaine, 33 marijuana, 7 methadone, 27 opiates, 21 methamphetamines, 3 alcohol, 12 other) (Wells County Probation Department)
20. Of the 20 cases referred to Teen Court in 2014; 8 were for ATOD-related offenses (40%) (Family Centered Services / Teen Court)
21. In 2014, there were 65 cases filed with the Wells County Prosecutor’s Office for drug-related charges; 152 cases filed were alcohol-related (Annual Report of Criminal and Child Support Activity, 2014)
22. Throughout 2014, WOW (Wells On Wheels) made a total of 21 trips to the address of a local pain clinic and 13 trips to the address of a pain clinic in Fort Wayne (Wells County Council on Aging / Wells On Wheels)
23. Wells County EMS responded to 29 calls for alcohol or drug related emergencies in 2014 (Wells County EMS)
24. There were 49 patients in the Bluffton Regional Medical Center Emergency Room who presented with overdose diagnosis (960.0-979.9) in 2014 (Wells County EMS)
25. In 2014, there were 5 deaths (ages 23-59) of Wells County residents attributed to drugs; 0 such deaths occurred for under age 20 (Wells County Health Department)

End of Year 1 Update:

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End of Year 2 Update:

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Final Update (end of Year 3):

- 1.
- 2.
- 3.
- 4.
- 5.

C. Goals:



1. Drug and alcohol –related arrests will decrease in relation to overall arrests for juveniles in Wells County
2. Drug and alcohol –related arrests will decrease in relation to overall arrests for adults in Wells County

End of Year 1 Annual Benchmarks:

- 1.
- 2.
- 3.

End of Year 2 Annual Benchmarks:

- 1.
- 2.
- 3.

Final Report (end of Year 3):

- 1.
- 2.
- 3.

D. Objectives:

1. Support any means for early identification of juveniles at risk of abusing ATOD
2. Support community awareness programs on ATOD
3. Encourage programs that support post-intervention rehabilitation

End of Year 1 Update:

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End of Year 2 Update:

- 1.
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Final Update (end of Year 3):

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A. Problem Statement #2: There is a lack of affordable resources and a need for additional education, prevention and treatment services in Wells County.

B. Supportive Data:

1. In 2014, the CADA board awarded \$6,951.66 to 10 agencies/programs to address ATOD issues in Wells County
2. There were 17 members of CADA with 1 new member joining in 2014; 3 guests were welcomed at coalition meetings throughout the year. A CADA representative participated in Northeast Indiana Regional Advisory Board meetings and activities
3. Various agencies/programs collaborated to create a county-wide Substance Use Protocol Manual. In November 2014, 40 binder copies and 100 electronic copies of the manual were distributed at a kick-off event with speaker, Sgt Dan Mawhorr. The manual is housed on the CADA website and will be reviewed and updated annually (Family Centered Services)
4. 374 students (1st graders) in Wells County schools (Ossian, Lancaster, Bluffton, Southern Wells, Kingdom Academy) participated in an Annual Health and Safety Fair in April 2015 learning about the dangers of substance abuse, poisons and other risky behavior (Purdue Extension, Wells County)
5. DARE Officers served 606 students (grades 1, 5, 10) in Wells County during the 2014-2015 school year (Bluffton Police Department)
6. Canine Officers provided 11 (BPD:3, WCSD:8) educational demonstrations in Wells County regarding illegal substances in 2014
7. Canine Officers also conducted 11 (BPD:5, WCSD:6) drug searches in Wells County schools during 2014; 2 (18.2%) of those searches resulted in evidence of contraband
8. Helping Hands Pregnancy Resource Center provided services to 47 pregnant women from January 2015 thru the end of August; 26 self-reported as smokers (55.3%) and 21 reported that they did not smoke (44.7%) (Helping Hands Pregnancy Resource Center)
9. For 63 out of 235 live births in Wells County throughout 2014, mothers reported smoking during pregnancy (26.8%) (Wells County Health Department)
10. By the end of 2013, a total of 11,087 Hoosiers were living with HIV disease, a condition that is in some cases attributable to injection drug use and needle sharing (The consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2014 / IU Center for Health Policy)
11. There were 10 people in Wells County that reported living with HIV in 2014 (ISDH Local Health Department Outreach Division)
12. The Positive Resource Center developed a MOU with the Wells County Health Department to conduct free HIV testing and prevention counseling to any person requesting the service. To those identified HIV positive, free comprehensive care coordination will be provided. Beginning in 2015, Positive Resource Center is scheduled to come to the Health Department quarterly, but will come on a more frequent basis if needed (Wells County Health Department)

13. There are 3 sites (Wells County Sheriff’s Department, Bluffton Police Department, Ossian Police Department) that participate in ongoing Prescription Drug Collection via the Wells County Solid Waste District; 13 (55 gallon) containers of prescription drugs were collected throughout the year and disposed of at the county-wide HazMat Day on May 2015 (Wells County Solid Waste District, Auditor’s Office)
14. The number of juveniles who attended SIGNALS (Setting Important Goals Now Against Life-threatening Substances), DETOURS (Developing Emotional control, Treating Others respectfully; and Understanding the Realities of Substance abuse), or Freedom From Tobacco, reported by Family Centered Services was 26 (7 SIGNALS, 18 DETOURS, 1 Freedom From Tobacco) in 2014
15. There were 6 juvenile residents at House of Hope of Northeast Indiana in 2014; 6 received substance abuse education and/or treatment; 4 successfully completed the program; 1 left the program; 1 continues in the program
16. In 2014, an AfterCare Director (addiction specialist) mentored 6 juvenile residents at House of Hope and provided drug awareness education and assisted them with making positive future choices (career/college/jobs/etc); all 6 completed the program
17. House of Hope provides monthly drug testing through Wells County Probation and random drug tests as needed; in 2014, 3 out of 7 (42.9%) residents tested positive for: spice, prescription drugs and marijuana
18. An Intensive Supervision Program was developed throughout 2014 to serve as a voluntary program for high risk offenders teared toward recovery; the participants will undergo frequent drug testing and weekly face-to-face supervision. The program will begin in January 2015 (Wells County Probation Department)
19. There were 4 support meetings held in Wells County each week throughout 2014: 3 AA and 1 CR. NA and RU began holding weekly meetings in 2015 (Park Center)
20. Wells On Wheels (WOW) transported 6 different individuals (69 trips) to and from support meetings (AA) in 2014
21. Most admissions to substance abuse treatment were due to alcohol; more than one-third of Hoosiers receive treatment for alcohol dependence (The Consumption and Consequences of Alcohol, Tobacco, and Drugs in Indiana: A State Epidemiological Profile, 2014 / IU Center for Health Policy)

	INDIANA	US
alcohol dependence	40.1%	38.9%
marijuana dependence	20.1%	17.4%
cocaine dependence	6.6%	6.9%
heroin dependence	7.9%	16.4%
meth dependence	6.5%	6.6%
prescription drug dependence	13.4%	11.8%

22. Park Center provided services to 133 clients for Chemical Dependency in 2014 (73 males / 54.9% and 60 females / 45.1%); 91 clients were assessed for the CD program (Park Center)
23. Of the total CD clients, 47 (36.1%) were referred by DCS and 65 (48.9%) were referred by Probation, Community Corrections, or Courts (Park Center)
24. In 2014, 93 (70%) of Park Center’s CD clients met the state’s definition of indigent (less than \$10,000/year) (Park Center)
25. There was a significant increase in clients who successfully enrolled in HIP or other Affordable Health Care Act insurances; 54 enrolled in 2014 (40.6%) (Park Center)

End of Year 1 Update:

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End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. There will be an increase in ATOD resources in Wells County
2. There will be an increase in evidence-based ATOD programming in Wells County, especially for juveniles

End of Year 1 Annual Benchmarks:

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- 2.
- 3.

End of Year 2 Annual Benchmarks:

- 1.
- 2.
- 3.

Final Report (end of Year 3):

- 1.
- 2.
- 3.

D. Objectives:

1. Support treatment programs currently available in our community for ATOD

- 2. Encourage and support existing and new prevention programs for ATOD in our community**
- 3. Support, encourage and develop education programs on ATOD issues for our community**

End of Year 1 Update:

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End of Year 2 Update:

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Final Update (end of Year 3):

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Next Annual Update Due: October 31, 2016

Next Comprehensive Community Plan Due: October 31, 2018

Date of Community Consultant Review:

Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

Terms and Conditions:

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6-16.

Initials: ald